



DOCKET NO. CX098043

2631

**TRANSMITTAL  
FORM**

Application Number	09/497,328
Filing Date	February 3, 2000
First Named Inventor	Sepehr Mehrabanzad
Group Art Unit	2631
Examiner Name	Jean B. Corrielus
Attorney Docket Number	CX098043

**RECEIVED**

AUG 06 2003

Technology Center 2600

Total Number of Pages in this Submission

**ENCLOSURES**

(check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-Related papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter with appropriate copies
<input type="checkbox"/> Extension of time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Response to Restriction Requirement
<input checked="" type="checkbox"/> Information Disclosure Statement, PTO/SB/08 & 3 References	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Associate Power of Attorney
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CDs	<input checked="" type="checkbox"/> Executed Declaration
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual	Susan C. Hill	Registration No.	35,896
Signature	<i>Susan C. Hill</i>		
Date	7/31/03		

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on the date listed below:

Typed or printed name	Elaine Cox	Signature	<i>Elaine Cox</i>	Date	7/31/03
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